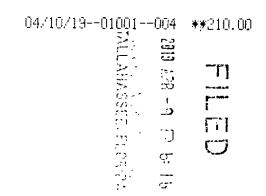
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(Re	equestor's Name)	-		
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(Ac	idress)			
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PICK-UP-	MAIT	MAIL		
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(Bu	isiness Entity Nar	ne)		
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Certified Copies	ertified Copies Certificates of Status			
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Special Instructions to	Filing Officer:			





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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 4/8/2019		##TT/A F &/	FA faks
ENTITY NAME_	GRAVITATE DESIGN GROUP LLC	**WALK /	
DOCUMENT NUI	MBER		
	PLEASE FILE THE ATTACHE	D AND RETURN THE NAME OF THE PARTY OF THE	
xx	Plain Copy Certified Copy	D AND RETURN**	ı
	Certificate of Status	E08104	
	PLEASE OBTAIN THE FOLLOWING FO	OR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendment	₹	
	Certificate of Good Standing		
	APOSTILLE' / NOTARIAL C	CERTIFICATION	
COUNTRY OF DE			
NUMBER OF CER	TIFICATES REQUESTED		
TOTAL OWED	885.00 сн	еск #_5981	_
Please call Tin	a at the above number for any issues	or concerns. Thank you so much!	

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605	.0115, Florida Statutes, the t	ındersigned,		
United Corporate S	Services, Inc.		, hereby resigns as		
	Name of Registered	d Agent	, norday rangsay as		
Registered Agent for	Gravitate Desig	n Group LLC			_
	Name o	of Limited Liability Company		1	_,
M18000002259				2919 APR -	-17
Document N	lumber, if known				حبصدن حبصین
		the above listed limited liab	after the date on which	known addres	Y*****
If signing on behalf of	an entity:				
	Maria R. Fis	chetti			
	***	Typed or Printed Name			
	Secretary				
		Capacity			

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314